



TRANSMITTAL FORM

Express Mail Mailing Label No.: EV832482650US

Application Serial Number	10/660,444
Filing Date	September 11, 2003
First Named Inventor	Chanduszeko
Group Art Unit	3734
Examiner Name	Andersen, Michael T.
Attorney Docket No.	NMT-015
Confirmation No.	4893

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form (1 pg.) <input type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form <input checked="" type="checkbox"/> Amendment and Response to Restriction Requirement (11 pgs.) <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets _____] <input type="checkbox"/> Petition for Extension of Time <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Supplemental Form PTO-1449 <input type="checkbox"/> Copies of Cited IDS References <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Sequence Listing submission <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above	<input type="checkbox"/> Copy of Notice to File Missing Parts of Non-Provisional Application <input type="checkbox"/> Formal Drawings <input type="checkbox"/> Request For Continued Examination (RCE) Transmittal <input type="checkbox"/> Power of Attorney By Assignee of Entire Interest/Revocation of Prior Powers and New Power of Attorney <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> CD(s) for large table or computer program <input type="checkbox"/> Amendment After Allowance <input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate)	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences <input type="checkbox"/> Appeal Brief (in triplicate) <input type="checkbox"/> Status Inquiry <input checked="" type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8 <input type="checkbox"/> Additional Enclosure(s) (please identify below)
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CORRESPONDENCE ADDRESS

Direct all correspondence to:
Patent Administrator
Kirkpatrick & Lockhart Nicholson
Graham LLP
State Street Financial Center
One Lincoln Street
Boston, MA 02111-2950
Tel. No.: (617) 261-3100
Fax No.: (617) 261-3175

SIGNATURE BLOCK

Respectfully submitted,

Ronda P. Moore, D.V.M.
Attorney for Applicants
Kirkpatrick & Lockhart Nicholson
Graham LLP
State Street Financial Center
One Lincoln Street
Boston, MA 02111-2950

Date: July 11, 2006
Reg. No. 44,244
Tel. No.: (617) 261-3167
Fax No.: (617) 261-3175



PATENT
Attorney Docket No. NMT-015

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): Chanduszko *et al.* CONFIRMATION NO.: 4893
SERIAL NO.: 10/660,444 GROUP NO.: 3734
FILING DATE: September 11, 2003 EXAMINER: Andersen, Michael T.
TITLE: Septal Puncture Device

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT AND RESPONSE
TO RESTRICTION REQUIREMENT

Dear Sir:

This paper is responsive to a restriction requirement issued in an Office action mailed from the U.S. Patent and Trademark Office on June 14, 2006, in relation to the above-identified application. Applicants believe no fee is due for consideration of this paper; however, if a fee is due, please consider this a conditional petition therefor and authorization to charge the required fee for this submission to Deposit Account No. 50-1721.

Amendments to the Claims begin on page 2.

Remarks begin on page 11